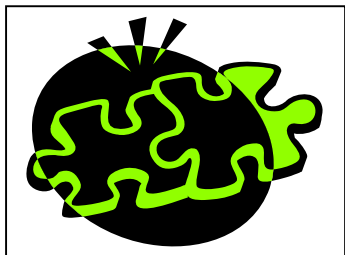


The Academy of Medicine of Cleveland/Northern Ohio Medical Association (AMC/NOMA)

Is pleased to present:

# "Solving The Third Party Payor Puzzle"



**WHEN:**

Wednesday, November 15, 2006

**TIME:**

8:30 a.m. - 9:00 a.m. Registration

9:00 a.m. - 4:00 p.m. Seminar

**\*BOX LUNCHES WILL BE PROVIDED\***

**WHERE:**

AMC/NOMA Executive Offices

Park Center Plaza I

6100 Oak Tree Blvd., Independence, Ohio 44131

Lower Level Meeting Room

**COST:**

AMC/NOMA Members and their staff - \$50 per participant

Non-Members - \$100.00

**PURPOSE:**

This seminar is intended to educate physicians and their office staff regarding third party payor claims and managed care issues.

**Featured Speakers:**

Anthem Blue Cross and Blue Shield

Palmetto GBA Medicare

Medical Mutual of Ohio

Ohio Department of Jobs and Family Services (Medicaid)

United Health Care (Invited)

**All speakers will be afforded time to answer general questions.**

**TO REGISTER FILL OUT AND RETURN THE FORM BELOW OR CONTACT K. SNIDER AT:  
216-520-1000 EXTENSION 314 OR EMAIL: [ksnider@amcnoma.org](mailto:ksnider@amcnoma.org)**

**PLEASE COMPLETE AND RETURN WITH YOUR PAYMENT**

Enclosed is my check (if completed by mail) in the amount of \$\_\_\_\_\_ for \_\_\_ attendees

Credit card payment: MC/VISA or AE: Credit card number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Name(s) of Attendee(s): \_\_\_\_\_

Physician(s) Name(s): \_\_\_\_\_

Office Address/City, Zip: \_\_\_\_\_

Please mail your registration form along with your check made payable to:

The Academy of Medicine of Cleveland/Northern Ohio Medical Association

P.O. Box 901724, Cleveland, Ohio 44101-9932 or if payment by credit card - fax to (216) 520-0999 WITH YOU CREDIT

CARD NUMBER - Attn: Kristine Snider

**DEADLINE IS NOVEMBER 8, 2006. THERE IS A LIMIT OF TWO PEOPLE PER OFFICE AND CUTOFF WILL BE 75 PEOPLE.**

**YOU MUST REGISTER PRIOR TO THE DAY OF THE SEMINAR AS SEATING IS LIMITED.**

**PAYMENT WILL BE ACCEPTED DURING REGISTRATION THE DAY OF THE SEMINAR.**